PTO/SB/22 (08-03)

TETTION TON EXTENSION	OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) ごうせいら
	In re Application of ANTHONY (Buss Cont
	Application Number 69/990, 714 Filed 11/21/20
	FOR CRAHESTEDIE THERMAN CYMICR
	Art Unit 1711 Examiner RATSUR 11
This is a request under the provis application.	sions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified
The requested extension and app	propriate non-small-entity fee are as follows (check time period desired):
One month (37 CFF	R 1.17(a)(1))
☐ Two months (37 CF	
Three months (37 C	OFR 1.17(a)(3)) s 930
Four months (37 CF	FR 1.17(a)(4))
☐ Five months (37 CF	R 1.17(a)(5))
Applicant claims small entity half, and the resulting fee is	y status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by or s: \$ $\underline{+4 \cdot 5}$
A check in the amount of	f the fee is enclosed.
Payment by credit card. 1	Form PTO-2038 is attached.
The Director has already	been authorized to charge fees in this application to a Deposit Account.
The Director is hereby as	been authorized to charge fees in this application to a Deposit Account. withorized to charge any fees which may be required, or credit any overpaymber
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The Director is hereby at to Deposit Account Numl I have enclosed a duplicate applican assignee State	uthorized to charge any fees which may be required, or credit any overpaymeterate copy of this sheet. It/inventor. e of record of the entire interest. See 37 CFR 3.71.
The Director is hereby at to Deposit Account Numl I have enclosed a duplicated and the applican assigner State attorney attorney	uthorized to charge any fees which may be required, or credit any overpaymeterate copy of this sheet. It/inventor. e of record of the entire interest. See 37 CFR 3.71. In the sheet of the entire interest. See 37 CFR 3.71. In the sheet of the entire interest. See 37 CFR 3.71.
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This collection of information is required by 37 CFR: 1.35(a). The information is required to obtain or retain a benefit by the publicity her is to fire (and by the USPTO to process) an application. Confidentially is governed by 35 U.S. C. 32 and 37 CFR: 1.4. This collection is not estimated regards of mutures to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the regard upon the regard of the many complete complete the times from and/or suggestens for reducing this burden, should be sent to the Cheft Refrancison Complete and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEN

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